



PTO/SB/21 (09-04)
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/917,112	
	Filing Date	07/27/2001	
	First Named Inventor	FURNAS	
	Art Unit	2624	
	Examiner Name	TOM LU	
Total Number of Pages in This Submission	2	Attorney Docket Number	LKJ-162A

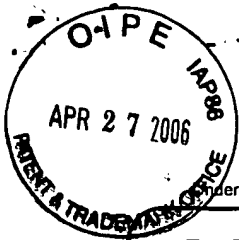
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Firm Name	NSIPA		
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Date	APRIL 21, 2006	Reg. No.	36,560

CERTIFICATE OF TRANSMISSION/MAILING			
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PTO/SB/83 (01-06)

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**REQUEST FOR WITHDRAWAL
AS ATTORNEY OR AGENT
AND CHANGE OF
CORRESPONDENCE ADDRESS**

Application Number	09/917,112
Filing Date	07/27/2001
First Named Inventor	FURNAS
Art Unit	2025 2624
Examiner Name	TOM LU
Attorney Docket Number	LKJ-162A

**To: Commissioner for Patents
P.O. Box 1450
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Please withdraw me as attorney or agent for the above identified patent application, and

- ☒ all the attorneys/agents of record.
- ☐ the attorneys/agents (with registration numbers) listed on the attached paper(s), or
- ☐ the attorneys/agents associated with Customer Number

NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.

The reasons for this request are: REQUESTED BY ASSIGNEE OF APPLICATION WHO NOW HAS THE APPLICATION FILE

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1. ☐ The correspondence address is NOT affected by this withdrawal.
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<input checked="" type="checkbox"/> Firm or Individual Name	MR. JOE ERWAY		
Address	DIGITAL DIAGNOSTICS SYSTEMS 3241 FITZGERALD ROAD SUITE 1		
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Signature	<i>Leland K Jordan</i>		
Name	LELAND K. JORDAN	Registration No.	36,560
Date	APRIL 21, 2006	Telephone No.	610-994-1782

NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

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